

West Bridgford
Urban District Council.

Annual Report

OF THE
MEDICAL OFFICER OF HEALTH
FOR THE YEAR 1913.

NOTTINGHAM:
"WEST BRIDGFORD ADVERTISER,"
145, ARKWRIGHT STREET.

WEST BRIDGFORD

Urban District Council

1913—14.

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REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1913.

BRIDGEWAY HOUSE,
NOTTINGHAM,

MARCH, 1914.

*To the Chairman and Members of
the West Bridgford Urban District Council.*

GENTLEMEN,

I have now the honour of presenting to you my Annual Report upon the health and sanitary condition of your parish during the year 1913.

The Public Health service is now one of immense magnitude and of great national importance, and year by year it continues to grow in magnitude and importance. As an evidence of this I may mention that since my last report was presented to you, fresh legislation has brought into existence two new classes of Health Officers whose duties bring them into touch with the existing Public Health Authorities.

These are the "School Medical Officers" and the "Tuberculosis Officers." The former are appointed by the Education Authorities—the latter are appointed for the purpose of carrying out the duties imposed upon the County Councils and the County Borough Councils, and indirectly on the Insurance Committees, for the prevention and treatment of tuberculosis in connection with the National Insurance Act.

The duty of the School Medical Officer is to detect among the children attending the Public Elementary Schools, any physical or mental defect which may retard the education of such, and to inform the parents of its existence.

It is quite competent for a Medical Officer of Health to act as School Medical Officer. This is frequently the case. Already about one thousand School Medical Officers have been appointed, some as part-time, and a lesser number as whole time officers.

The "Tuberculosis Officer" appointed must have special training and experience in dealing with tubercular affections, and must devote all his time to his duties. He acts as adviser to the Insurance Committee in connection with the sanatorium clauses of the National Insurance Act, and takes charge of the tuberculosis dispensary.

These dispensaries act as receiving houses for the examination and treatment of tuberculous patients, and the distribution of information and other educational work in connection with the prevention and treatment of consumption. Up to the present time not many of these Officers have been appointed.

Locally, 1913 was a year of some importance. In a rapidly developing and progressive district like West Bridgford, every year brings before your council some question of importance, which gives rise to anxious consideration and discussion. 1913 was no exception. The most important question, which occupied much of your council's time and thought, was the one dealing with an improved means of locomotion between your parish and the City of Nottingham. It had long been thought that the old-fashioned horse-drawn omnibus was out of date and that some more rapid and cleaner mode of transit was imperative.

After prolonged and anxious consideration of the various methods of effecting this change, your Council decided to seek Parliamentary powers to enable it to run motor 'buses between

the distant parts of your parish and the city boundary at Trent Bridge. These powers were granted in the early summer, immediate steps were taken to build a suitable garage, to select and order the most suitable type of vehicle, and to engage and organise a staff of employees.

The close of the year saw the completion of your Council's labours, and the parish has now an efficient service of motor 'buses which has already proved to be highly popular and likely to prove remunerative. If further proof be required of the spirited and progressive policy which has always dominated the work of your Council, it is found in the fact that West Bridgford is the first Urban District Council in England to obtain parliamentary powers to run and possess its own motor 'buses.

A suitable garage, to stable eight vehicles, has been erected at a cost—including contingent works and equipment—of nearly £2,000. The building is a substantial one, practically fireproof,

The water supply for washing purposes is obtained from a tank built to hold 2,000 gallons, 20 feet above ground. The water is obtained from a well by pumping. This well was sunk near the pumping station. The water costs nothing and so a great saving has been effected. Provision has been made for executing all running repairs and alterations to the 'buses "on the premises."

West Bridgford forms one of 16 separate urban districts in the County of Nottingham. (There are also 11 rural districts in the County) Each of these districts has a Medical Officer of Health who must present an annual report to his respective council. The Local Government Board, to whom copies of these reports must also be sent, request that these should be presented as early in each year as possible. Copies are also sent^d to the Medical Officer of Health for the County. In 1912, the first report was received on February 13th, and the last on August

12th. Seventeen reports were received during the months of March and April. My own report was sent in on the 26th March, being the sixth in order of reception.

The area of West Bridgford is 1,190 acres. The rateable value of the property in the parish assessable to the General District Rate was estimated in September last to be £62,413, being an increase of nearly £4,000 over the corresponding period of the preceding year.

A penny rate is estimated to bring in £260 gross and £246 net. A rate of 1/8 in the pound is estimated to produce £4,920 net. The District Rate is 1/8 in the £ for the present half year. Considering the many advantages enjoyed by the residents in your parish, this low District Rate is highly satisfactory.

(1) The Physical Features and General Character of the District.—West Bridgford is situated on the south bank of the River Trent as it skirts the City of Nottingham. The district is built chiefly upon the river drift immediately under which lies in the vicinity of the river the bunter sandstone, and further south the keuper-marls. The alluvium and gravels of the Trent and its local tributaries are found in the neighbourhood.

The river drift consists mainly of sand and gravel, and receives water from the hills to the south and drains into the river.

The greater part of the district lies at a level between 79'00 and 81'00 O.D.

Parts of the district are subject to floods, when the river reaches an abnormal height, but it is on such occasions only that the district is inconvenienced. The wisdom of your Council in compelling the estate owners to raise all new roads to a height

above the reach of ordinary rainfalls has greatly tended to increase the value of property.

Unfortunately many houses have been built with cellars below the road level, and when the river is very full these cellars may get water, but this disappears as soon as the river sinks to its normal level.

There was no surface flood during 1913.

The district is almost wholly residential, being peopled by commercial travellers, those connected with the staple trades of Nottingham, professional men, clerks, tradesmen, and others.

The roads are paved with tar macadam, and are dustless and economically scavenged.

The chief roads have trees planted on either side, which add greatly to the beauty and attractiveness of the district.

The residents are fully provided against the risk of fire by a fully organised and equipped fire brigade, consisting of a captain 2 officers and 10 men.

In case of fire each man is warned by an electric bell in his home, and which is connected with the two fire stations

National Insurance Act.—This Act has now been over a year in force and we are able to make some deductions therefrom. In my own experience the outstanding fact is that very few cases of real and serious disease come under the care of the panel doctor, while the number of trifling ailments is legion. Of the hundreds which came to me in my consulting room, the number of cases of real illness which necessitated going to bed could, up to now, be counted on the fingers of one hand. Indeed, the time of a panel doctor in his consulting room, is largely taken up in the writing of prescriptions for minor ailments many of them

of an imaginary character, and in signing sick certificates. This valuable time which should be (and was before this Act came into force), occupied in the elucidation of disease, the making of an accurate diagnosis, and giving advice as to treatment, is now being frittered away on clerical work. This is disheartening and humiliating work to the physician and I am afraid will tend to lower the dignity and usefulness of the medical profession. The bulk of the vast sums of money provided for medical attendance under the Act is being expended on minor and trivial ailments

Before long it is supposed that the dependents of insured persons will be brought within the scope of the Act. Panel work is not satisfactory now—it will be more so when the dependents come in. A strong effort will then be made to form a National Medical Service staffed by whole-time salaried officers, and which will embrace Poor Law Relief, Public Health, Education, Hospital and Insurance—but the time to further discuss this question has not yet arrived.

One of the best provisions of the Act is that which contemplates the treatment on a comprehensive scale of persons suffering from tuberculosis. Insured persons in your parish who are suffering from consumption are now admitted to the Ransom Memorial Hospital, near Mansfield, which has been taken over by the Notts. County Council, but the demand upon this hospital accommodation is too great. One recent case in my own practice had a long weary wait of three months before he could be admitted.

Any scheme which is to form the basis of an attempt to deal with this pressing problem of tuberculosis should be available for the whole of the community and not for insured persons only.

The panel system is on its trial and its worth will be judged by its results. If it can justify itself by showing a diminution of the sickness rate and by earning the goodwill and appreciation of

those who receive medical treatment under it, well and good,—otherwise it will have to be replaced by a better and more efficient service.

Population.—On 30th June, 1913, there were 3,361 houses in the Parish of which 172 were uninhabited. Of these, 141 were in the Musters Road district, and 31 in the Lady Bay district. The unoccupied houses in the former district show a slight increase while there is a substantial decrease in the latter district when compared with 1912.

Taking an average of four persons to each inhabited house we get a population at last midsummer of 12,756, which show an increase over the same period of 1912 of exactly 600 souls. This has been about the average rate of increase from year to year.

It is upon this estimated population of 12,756 that I base my vital statistics. The estimated average number of inhabitants per house is very low.

Deaths.—102 deaths were registered as having occurred in the Parish during 1913. Of these, 55 were males and 47 were females.

The monthly distribution was as follows:—

January	13 deaths.
February	12 „
March	16 „
April	4 „
May	9 „
June	8 „
July	7 „
August	2 „
September	4 „

October	7	„
November	13	„
December	7	„
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				102	
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The highest mortality, as might be expected, was during the winter months, if we except December, when the mortality was low.

The age mortality was as follows:—

Under one year	...	...	13 deaths.
1 to 10 years	...	...	4 „
10 to 20 „	...	...	1 „
20 to 30 „	...	...	7 „
30 to 40 „	...	...	5 „
40 to 50 „	..	...	9 „
50 to 60 „	...	...	15 „
60 to 70 „	...	...	15 „
70 to 80 „	...	...	22 „
80 to 90 „	...	...	10 „
90 to 100 „	...	...	1 „
			<hr/>
			102
			<hr/>

This table shows that of the total deaths 13 were infants who failed to complete the first year of their existence. 33 persons died over the age of 70 years—that is, of the total deaths in your parish, one third of these lived to be over 70. Eleven persons—or over 10 per cent—lived to be over 80 years of age, and one lived to the advanced age of 91 years. These are very remarkable figures. I think they are due to the fact—apart from the very excellent sanitary condition of the district—that a good many elderly people, who have retired from business, select West

Bridgford as a highly desirable place in which to spend their declining years.

The chief causes of death were as follows:—

Consumption	6 cases
Diseases of lungs other than Consumption (e.g. Pneumonia, Pleurisy, Bronchitis, etc.)	9 "
Heart Disease	15 "
Diseases of the Brain (paralysis, appoplexy, etc)	11 "
Renal Disease	7 "
Cancer	15 "
Senile Decay	9 "
Prematurity	7 "

There were four uncertified deaths. There was one death by suicide and one due to accident. One inquests was held.

The "gross" death rate calculated on the estimated population (12,756) is 8 per 1000, as compared with 7.4 per 1000 for the preceeding year.

This is the "gross" death rate, but "transferable" deaths must be reckoned with. These are deaths of persons who, having a fixed or usual residence in England or Wales, die in a district other than that in which they resided. These "transferrable" deaths are divided into two classes, "inward transfers" and "outward transfers." The "nett" death-rate is arrived at by subtracting the number of deaths of persons who have died in your parish (inward transfers) but whose usual place of residence is elsewhere and by adding the number of deaths of residents in your parish but who have died elsewhere (outward transfers).

The inward transfers are obtained by the Medical Officer of Health from the fortnightly reports of the local registrar. There

were 5 of these during 1913—two from Nottingham, one from Sandiacre, one from Wainfleet and one from Liverpool.

The outward transfers are obtained from the County Medical Officer of Health, who gets quarterly reports from the Registrar General and who allocates them to their various districts within the county.

During 1913, Dr. Handford has kindly informed me that there were 13 deaths, 8 males and 5 females, of residents which took place away from their homes in West Bridgford, as follows:—At Spilsby 1, Bath 1, Weston-super-Mare 1, Arnold 1, Bingham 1 and Nottingham 8.

The “gross” number of deaths, as already stated, was 102. From this number must be subtracted those “inward transfers” (5), and add those “outward transfers” (13).

Thus, $102 - 5 + 13 = 110$, or a “nett” death rate for the year of 8.6 per 1000. The nett death rate for the past 3 years has been practically the same.

Infant Mortality.—During the year there were 13 deaths of infants under the age of one year, as compared with 10 deaths during the preceding year.

The causes were as follows:—Bronchitis (1), Hydrocephalus (1), Convulsions (1), Gastritis (1), Syncope (1), Whooping Cough (1), Prematurity (7).

The rate of infant mortality in West Bridgford has always been low, which may be taken as a favourable sign of the health and well-being of the community.

It has been asserted that a *high* infant mortality improves the health of the survivors by “weeding out” the unfit. It has on the other hand, been also asserted that a *high* infant mortality

is associated with a deterioration of the health of the survivors, in that the causes of the high mortality act not only on those who die, but in a lesser degree on those who survive. The question is a debateable one, but the latter contention is the more probable.

A low rate of infant mortality should be expected in your parish, because it depends on efficient domestic sanitation, good homes, and intelligent motherhood, all of which exist there.

Breast feeding is the best natural protection against infant mortality, but the mothers seem strangely averse to this natural process.

Births —199 births were registered during the year—101 boys and 98 girls. There was only one illegitimate birth.

The birth rate for the year was 15·6 per 1000, which is an advance of 2 per cent on the previous year. For this grain of comfort, I suppose we must be thankful.

The average birth rate for the ten years 1902-11 per 1000 of the population in the 19 Urban districts of the County of Nottingham was 30·8. The present birth-rate of West Bridgford is therefore just 50 per cent lower than this.

High birth-rates prevail in the coal mining and manufacturing districts of the County and low birth-rates in the agricultural and residential districts.

The birth-rate continues to fall heavily in nearly all civilised countries.

In West Bridgford there are many homes with only one child. There are also many childless homes.

If the population is to be replaced, average families of four or five are required.

Marriages—There were 63 marriages during the year. Of these 54 took place in the Parish Church, 6 in the Congregational, 2 in the Wesleyan, and one in the Baptist Church.

Infectious Diseases.—46 cases were notified as against 106 cases during 1912—a very satisfactory reduction.

Scarlet Fever	24 cases.
Diphtheria	7 „
Tubercular Diseases	13 „
Erysipelas	2 „
	—
	46
	—

All these diseases show a very considerable diminution over the previous year.

NOTIFIABLE DISEASES.

Scarlet Fever.—24 cases were notified during the year. Owing to special circumstances 4 of the cases were removed to the Basford sanatorium, and one to the Basford isolation hospital. The large majority of cases of scarlet fever in your parish can be quite well treated at home, and with ordinary care there is little risk of the disease spreading.

Children from houses infected with this disease are not allowed to attend school until all risk of infection has passed.

Medical Officers of Health are now inclined to relax the pressure for the removal of cases of scarlet fever to isolation hospitals, being satisfied that a high percentage of removals does not result in a corresponding check to the prevalence of the disease.

A great change has recently taken place in the treatment of this disease. In hospitals patients are no longer confined to

warm wards, but lie out in the open all day when the weather is suitable. They are protected from the cold by warm clothing, sheets being replaced by blankets, and hot bottles used if necessary. They are carefully watched by the nurses to see that the body heat is maintained.

The result of this heroic treatment—of which our own Medical Officer of Health for Nottingham has been a pioneer—has been most successful.

In bad cases a marked improvement is noticeable within two days after admission. Delirium and restlessness cease, and the patient falls into a calm and quiet sleep—the temperature falls to normal and the throat condition rapidly improves. Complications are also much rarer than in cases treated indoors.

In my own practice I now always treat my cases by having the bedroom windows open night and day and with the happiest results.

Cerebro-Spinal Fever and Poliomyelites.—In my last year's report I spoke fully of those diseases, which are compulsorily notifiable. No case of either disease was reported during the year.

The notification of these diseases will in time add to our knowledge of their causation, spread, and prevention, which is at present very limited.

Diphtheria.—Only 7 cases were notified during the year, a very satisfactory decrease when compared with previous years. The disease seems to be getting less virulent. Quite mild cases frequently occur. The local and constitutional symptoms may be so slight that the disease is not recognised. It is the presence of those unrecognised and unrecognisable cases which make the disease endemic.

In most of the houses in your parish the diphtheritic patient can be isolated and if treated early by means of the antitoxen serum, recovery is almost certain. When occurring amongst the poor, cases should be hurried into hospital for the purpose of securing the early and liberal administration of the anti-toxin. All the cases in your parish recovered.

Enteric Fever.—No cases were notified during the year. One case with suspicious symptoms occurred in my own practice in one of the farms in the parish. The water supply which was obtained from a well adjoining the manure yard was suspected and on examination was found to be grossly polluted, and quite unfit for domestic use.

Representations were made to the owner of the farm who at once agreed to have the farm supplied with Nottingham water. The work was begun at once, and in a few days the farm had a plentiful supply of pure water.

In my last year's report I entered into the question of the carriage of the specific infection of enteric fever and other diseases by the common house fly. Evidence has recently accumulated in reference particularly to cholera and enteric fever in tropical regions and in military encampments which appears conclusively to incriminate these insects.

Erysipelas —2 cases were notified, both mild.

Smallpox —The country remained free from smallpox all year.

Consumption.—There were 6 fatal cases of this disease during the year as compared with 8 cases during the previous year. All cases of tubercular disease are now compulsorily notified. This will, it is hoped, facilitate the investigation of the sources of infection and assist in securing some improve-

ment in the conditions under which consumptives live, for it is often a disease of poverty.

Medical Officers of Health are now required to keep a register with full particulars of each notification received, and to send to the Medical Officer of Health for the County, at the end of each week, a statement of all notifications received during the week. A similar statement must also be sent to the Local Government Board.

The Medical Officer of Health must make such inquiries and take such steps as may be necessary or desirable for investigating the source of infection, for preventing its spread and for removing conditions favourable to it.

Sanatoria.—Since the inception of the National Insurance Act, the sanatorium treatment of consumption has acquired special importance. Its main objects are life in the open air, good food, graduated rest and exercise and constant medical treatment. There is no panacea for consumption. No method of treatment is known which will save advanced cases, so that sanatorium treatment has its limits. The sanatorium death-rate in advanced cases is four times greater than it is in early cases. If cases be sent to a sanatorium with a view to cure the extent of the disease should be strictly limited.

Sanatoria have, however, an educational value. Many ex-patients, on returning home, teach others the value of fresh-air and personal hygiene—others unfortunately show no signs of conversion and remain as careless as they were before admission to the sanatorium. Sanatoria are, however, very expensive, and the education might be given at much less cost.

The money would be better expended on research work as to the origin of consumption, the production of a pure milk supply, the compulsory isolation of dangerous cases, tuberculin dispensaries, and improved housing conditions.

Tuberculin.—Many consumptives do well under this treatment, but if given at the wrong time or in unsuitable doses, it may do harm. Cases most suited to this line of treatment are generally found to respond readily to any favourable change in the surroundings, so that it is not always easy to assess the value of tuberculin.

If a person has recovered from tubercular disease by tuberculin, sanatorium or other treatment, he still remains more liable to a return of the disease than a previously healthy person, or to a fresh injection of another part of the body.

The advantages of the tuberculin treatment are that it is simple, cheap, frequently effective and that it does not interfere with home life and work.

It will take time and experience to determine the position tuberculin holds in the scientific control of tuberculosis.

NON-NOTIFIABLE DISEASES

Cancer.— There were 15 deaths from cancer as compared with 9 cases during the year 1912. The death-roll from this disease increases materially year by year, and this applies to all civilized countries. Of the 15 cases 7 were males and 8 were females. Their ages ranged from 35 to 77 years. The organs affected were—reterine organs 5, stomach 4, breast 1, pancreas 1, liver 1, bladder 1, ear 1.

The average age of the males was 62 years, and of the females 54 years. The disease is therefore one of adult life and old age. No class seems to escape. Rich and poor alike seem to suffer. Medical science in spite of constant investigation and reseach has so far failed to counteract its ravages.

In its early stage cancer is a *local* and not a *blood* disease, and is therefore amenable to surgical treatment. Early medical

advice is therefore imperative. An early recognition of this fact would save many lives.

Meantime it is disconcerting to learn that the cancer death-rate has nearly doubled during the past 30 years.

Measles and Whooping Cough.—These are not notifiable diseases so it is impossible to say how far they existed in your parish during the year under consideration. So far as my own experience goes neither disease was prevalent—at least they did not occur in epidemic form, and there was no school closure necessary.

These diseases cause a large death-rate annually, mainly amongst young children under the age of five years. Neither disease meets with sufficient care on the part of the parents. They frequently predispose to tuberculosis, calling into activity disease which might otherwise remain latent.

Measles is an important factor in the causation of deafness.

The Local Government Board's returns for 1911-12 show a marked tendency for both diseases to decline, in part due to the more intelligent care of infants and young children, and this decline will doubtless continue.

During 1913, one death was registered as due to whooping cough.

Town Planning.—Being a comparatively new district, the Town Planning Act of Mr. John Burns—1909—does not concern your parish greatly. There should be no comparison between an improvement scheme and a town planning scheme. The former concerns areas already built upon, and has to be carried out mainly by the enforcement of bye-laws. Additional air space is provided by the pulling down or alteration of

existing buildings and roadways are widened or reconstructed through districts already populated. (We see these changes in Nottingham at the present time).

A town planning scheme on the other hand is for the purpose of securing proper sanitary conditions, beauty and convenience in connection with the laying out and use of land which is in the course of development or which appears likely to be used for building purposes.

An improvement scheme leaves factories, workshops, public buildings, houses, etc., on their existing sites, but a town planning scheme can decide in advance just where they may be placed, having regard to the general convenience and amenity.

In an improvement scheme the local authority is concerned only with the owners of the property in question—the essence of town planning is a cordial co-operation between the local authorities and the owners of adjoining properties.

Local authorities must first apply to the Local Government Board for sanction to the preparation of any such scheme and the Board's regulations, which are of a very detailed and comprehensive character, must be observed. It is satisfactory to learn that it is the Board's intention to considerably simplify and improve these regulations.

Some fruits of the Act are observable, however, in your parish, especially in that part which has been developed since the act came into force—the district between Albert Road and the Radcliffe Road. Here the roads are wider apart, and are wider and the general amenities of the district show a distinct improvement over the older parts of the parish.

The same remarks apply to those new roads and buildings which have been erected on the approach to Edwalton.

Under the Councils' Act of 1913, powers are conferred upon public authorities to exercise some control over the architecture of the district, and other matters, and your Council, without putting the tedious machinery of the Town Planning Act in force, have obtained, by representation to the estate owners, wider streets where present circumstance or future prospects required. Thus Davies Road, connecting Albert Road and the main highway to Radcliffe and the south, is 50 feet wide, and Priory Road, which runs parallel, is 42 feet wide, although your Council's bye-laws provide for roads only 36 feet wide

Lighting.—Provision was made during the year for the erection of 24 new lamps in the newer parts of the parish.

Water Supply.—During the year, 900 yards of small diameter water mains were laid in the parish. No alteration of importance in the supply was made during the year, except that a small proportion of the Derwent water has been distributed. This water when blended with the existing sandstone supply, makes an ideal water for domestic purposes. It is interesting to note that the water supply from the Wilford Hill Reservoir has been extended to the villages of Bradmore and Bunny, via Ruddington.

Food and Drugs Acts, (1875 to 1899). During the year 79 samples of various foods and drugs were submitted for analysis by the public analyst appointed by the County Council. It is to the credit of the shopkeepers in the parish that no prosecution took place, although one seller was cautioned for adulteration. 57 samples of milk were examined with, on the whole, satisfactory results.

Sanitary Arrangements.—During the year 26 defects connected with sanitation were remedied.

There are now 250 privy ashpits in the parish. These will

decrease in number year by year until they disappear entirely. They constitute the one sanitary defect in your parish.

The Public Health Amendment Act of 1907 was seriously considered by your Council and certain parts which had a bearing on the well-being of the district were adopted.

Previous to this time, and acting on the maxim "the choice of the lesser of two evils," ashpits had been allowed to be converted into pail closets. This will no longer be allowed. Any future conversion must be to the water closet system.

The provisions of the above Amendment Act gave your Council power to convert all the remaining ashpits and privies as well as all pail closets into water closets—a certain sum to be provided in estimating the yearly rates for this purpose.

Gradually these sanitary abominations will disappear and the whole district will have a water-carriage system of sewage disposal.

In beginning the work of conversion, an unforeseen difficulty presented itself and against which no provision seemed to have been made in the Act, as follows :

The water used for domestic and sanitary purposes in your parish is supplied by the Nottingham Corporation. Before this supply can be obtained, the property owner must sign an agreement to pay the water charges. In one case, after the closets had been converted into water closets and the supply of water ready, the owner refused to sign for the water and the Corporation declined to allow the water which was ready to be supplied to the closets to be turned on.

Ultimately the Corporation gave way on the point, but the question may prove a serious one and an obstacle to further conversion. The question is now sub judice between your

Council and the Nottingham Corporation and it is hoped an amicable arrangement may be arrived at. The difficulty might be obviated by an amendment of the Act, designed to overcome this unlooked for difficulty.

The parish is efficiently scavenged by your Council's own staff of workmen. Every new house is now provided with a w. c., and a moveable galvanized iron bin for ashes and refuse. These are emptied weekly.

Every street in the parish is sewered, and efforts are always made by your surveyor to have the sewers laid in new districts before houses are built. This will obviate the necessity, which was prevalent in the earlier days, of having cesspools until the sewers were laid. As far as I know there is not a cesspool remaining within the boundaries of your parish.

Extensive additions to the sewerage system have been carried out in the estate between Albert Road and the Radcliffe highway and in the roads leading off the Melton Road.

Summary.—At the present time there are in the parish the following :

Houses with privy ashpits	256
Houses with ashpits but no privy	16
Houses with movable ashbins	3000
Houses with pail closets	478

These pail closets were instituted some years ago to take the place of the deep privy-middens, but with the march of sanitary methods, pail-closets are no longer allowed, and all alterations and conversions must now be to the water-carriage system.

Every house with a w.c., is provided with a galvanized ashbin. These are emptied weekly, ashpits are emptied on

receipt of notice given by the tenant. All scavenging work is done by your Council's men and horses. The streets and roads in the district are also scavenged and watered by your own staff

Refuse Disposal—All domestic refuse and garbage is taken to the destructor and destroyed by fire. There are no "tips," and no refuse goes out of the district. The destructor is a two celled one, with boilers, steam disinfecter etc. It has given complete satisfaction since its erection. The clinkers obtained as the result of the burning of the refuse are used chiefly for road-making. They are valuable by-products. Owing to the nature of the district there is very little trade refuse to be disposed of.

Dairies and Cowsheds.—There are now only three farms in the parish with a stock of milk-cows. These are visited periodically by Mr. Pare and myself. The cowsheds are still far from satisfactory as regards cleanliness. Reform is required in three ways (1), greater cleanliness of the cows. (2), greater cleanliness of the cowsheds. (3), greater cleanliness on the part of the milkers. In my last year's report I referred to the first of these, and my remarks have been verified by the County Medical Officer of Health, who in his Annual Report says:

"The chief cause of this dirt in the milk is the unnecessarily filthy condition in which so many cowsheds are kept. The cows' quarters become encrusted with filth and are seldom or never cleansed. In the process of milking some of the dirt finds its way into the milk pail."

Especially should greater attention be paid to the grooming of the cows, including the washing of the teats and udders before milking.

Bakehouses.—The number of bakeries remain the same (10). They have all been built within recent years, and

are all of modern construction. They are all above ground, and are kept in good order.

Factories and Workshops.—There is no factory in the parish. A laundry, an aereated water manufactory, several builders and joiners shops comprise all that comes under this denomination. They are all kept in a good sanitary condition.

Outworkers.—There are only quite a few out-workers in the parish. They are engaged chiefly in lace and hosiery work and all work under excellent conditions.

Interments.—There were 31 burials in the parish churchyard during the year. As I have frequently urged this ground should be closed owing to overcrowding, and the nearness of so many dwelling houses.

The Nottingham Corporation Cemetery on the Wilford Hills is approaching completion. It is difficult to understand why burials have not been allowed before now.

Meteorological.—There was neither excessive heat, nor unusual cold experienced during the year. August 3rd was the hottest day, when the thermometer reached 81·2. January 13th was the coldest day.

The total rainfall was 23½ inches. The heaviest fall was on October 5th when 2½ inches of rain fell. February, June and July were dry months.

The Autumn months were unusually mild, and roses and other flowers continued in bloom up till December.

Roads.—The roads in the parish are kept in good order. In connection with this question it is interesting to note that the Third International Road Congress has issued its report. It deals with the important question of road-construction, improved surfacing, causes of wear and deterioration etc.

The report has come to no very definite conclusions, but it may be said that tar is for general use the best article either for road-crust formation or for dust abatement.

The use of tar and tarry compounds have proved to be both beneficial and economical in road maintainence.

I have already remarked that every year brings some important duty for your Council to consider. The present year will be no exception, for an extension of the present public offices will have to be considered. These have now to provide accommodation for the water-rate collector, and for an increased clerical staff in connection with the motor busses, while the Basford Board of Guardians require accommodation for their collector. Fortunately your Council foreseeing this extension, perhaps not quite so soon, has sufficient land for extension at the back of the present offices, and your surveyer is at the present time engaged in getting plans to meet these increased requirements.

In concluding this report I would again desire to express my gratitude to the Chairman, and to every member of the Council for their unvarying kindness to myself and I think I may say to the other officials of the Council.

I have to thank my valued colleague Mr. Pare for his assistance, always willingly rendered to me—also Mr. Redgate the clerk to the Council, and Mr. Comery the collector, for information necessary for the completion of this report.

I remain, Gentlemen,

Yours obediently,

WALTER HUNTER, M.D.,
M.O.H.

TABLE I.

Vital Statistics of whole District during 1913, and previous years.

NAME OF DISTRICT—WEST BRIDGFORD (NOTTS).

YEAR.	Population estimated at Middle of each year.	Births.			Total Deaths Registered in the District.		Transferable Deaths.		Nett Deaths belonging to the District.			
		Uncorrected Number.	Nett.		Number.	Rate.	Of Non-residents registered in the District.	Of Residents not registered in the District.	Under 1 Year of Age.		At all Ages.	
			Number.	Rate.					Number.	Rate per 1,000 Nett Births	Number.	Rate.
1	2	3	4	5	6	7	8	9	10	11	12	13
1908	11362		188	16.5	64	5.6		6	11	58	70	6.2
1909	11934		182	15.3	72	6		3	8	44	75	6.3
1910	12600		175	13.9	65	5.2		3	7	40	68	5.4
1911	11632	197	200	17.2	101	8.7	1	8	22	110	108	9.4
1912	12156	168	167	13.8	90	7.4		14	10	60	104	8.5
1913	12756	199	199	15.6	102	8	5	13	13	65	110	8.6

Area of District in acres
(exclusive of area
covered by water.)

1,190

Total population at all ages, 11,632

Number of inhabited houses, 2,864

Average number of persons per house, 4.06

At Census
of 1911.

TABLE II.

Cases of Infectious Disease Notified during the year 1913.**WEST BRIDGFORD (NOTTS.)**

NOTIFIABLE DISEASE,	CASES NOTIFIED IN WHOLE DISTRICT,							
	At all Ages	At Ages—Years,						Total cases rem d to Hospit'l
		Under 1 Year.	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	
Small Pox ..								
Cholera ...								
Diphtheria (includ- ing Membranous Croup)	7		2	2	2	1		
Erysipelas ..	2						2	
Scarlet Fever ..	24		3	15	5		1	5
Typhus Fever ...								
Enteric Fever ...								
Relapsing Fever ...								
Continued Fever .								
Puerperal Fever ...								
Pulmonary Tuberculosis	9				4	4	1	
Other forms of Tuberculosis	4			4				
TOTALS	46		5	21	11	5	4	5

Isolation Hospital :

Name and Situation—BASFORD SANATORIUM.

RANSOM MEMORIAL SANATORIUM

TABLE III Causes of, and Ages at Death during the Year 1913.

NAME OF DISTRICT—WEST BRIDGFORD (NOTTS.)

CAUSES OF DEATH. 1	Nett Deaths at the subjoined ages, of "Residents" whether occurring within or without the District.								
	All Ages. 2	Under Year 1 3	1 and under 2 years 4	2 and under 5 years 5	5 and under 15 years 6	15 and under 25 years 7	25 and under 45 years 8	45 and under 65 years 9	65 and upwards 10
All Causes { Certified	98								
{ Uncertified	4								
Enteric Fever	1								1
Small Pox									
Measles									
Scarlet Fever									
Whooping Cough ..	1	1							
Diphtheria and Croup									
Influenza	2					1			1
Erysipelas									
Phthisis (Pulmonary Tuberculosis) ..	6					1	4	1	
Tuberculous Meningitis	1	1							
Other Tuberculos Diseases ...									
Cancer, malignant disease	15						1	10	4
Rheumatic Fever									
Meningitis									
Organic Heart Disease	15			1			3	3	8
Bronchitis	6	1						1	4
Pneumonia (and other forms)	3		1				1	1	
Other diseases of Respiratory organs									
Diarrhoea and Enteritis	1								1
Appendicitis & Typhlitis									
Cirrhosis of Liver	1							1	
Alcoholism									
Nephritis and Bright's Disease	6							2	4
Puerperal Fever ...									
Other accidents and diseases of Pregnancy and Parturition	2						2		
Congenital Debility and Malformation, including Premature Birth	7	7							
Violent Deaths, excluding Suicide	1			1					
Suicide	1						1		
Other Defined Diseases	20	2				1	2	6	9
Diseases ill-defined or unknown	13	1						3	9
	102	13	1	2		3	14	28	41

TABLE IV.

WEST BRIDGFORD URBAN DISTRICT.

Infant Mortality.

1913. *Nett Deaths from stated causes at various Ages under 1 year.*

Causes of Death.	Under 1 week	1-2 Weeks.	2-3 weeks	3-4 weeks	Total under 1 month.	1-3 months.	3-6 months,	6-9 months.	9-12 months.	Total deaths under 1 year
All causes { Certified. Uncertified.										
{ Small-pox ...										
{ Chicken-pox ...										
{ Measles ...										
{ Scarlet Fever ...										
{ Whooping Cough ...						1				1
{ Diphtheria and Croup ...										
{ Erysipelas ...										
{ Tuberculous M'ningitis ...										
{ Abdominal Tuberculosis ...										
{ Other Tuberculous Diseases ...										
{ Meningitis (<i>not Tuberculous</i>) ...										
{ Convulsions ...			1		1				1	2
{ Laryngitis ...										
{ Bronchitis ...				1	1					1
{ Pneumonia (all forms) ...										
{ Diarrhoea ...										
{ Enteritis ...										
{ Gastritis ...										
{ Syphilis ...										
{ Rickets ...										
{ Suffocation (overlying) ...										
{ Injury at Birth ...										
{ Atelectasis ...										
{ Congenital Malformations ...									1	1
{ Premature Birth ...	4	2			6	1				7
{ Atrophy, Debility and Marasmus ...			1		1					1
{ Other causes ...										
Totals	4	2	2	1	9	2			2	13

Nett Births in the year { legitimate ... 198
 { illegitimate ... 1

Nett Deaths in the year of { legitimate infants 13
 { illegitimate infants 0

Factories, Workshops, Laundries and Workplaces.

NAME OF DISTRICT.—WEST BRIDGFORD, NOTTS.

I.—INSPECTION.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Premises.	Number of		
	Inspections	Written Notices.	Prosecutions
Factories (including Factory Laundries)	4		
Workshops (including Workshop Laundries)	16		
Workplaces (other than Outworkers' premises included in Part 3 of this Report)			
Total	20		

2.—DEFECTS FOUND.

Nuisances under the Public Health Acts:—

One case was found.

4—REGISTERED WORKSHOPS.

Workshops on the Register (s. 131) at the end of the year. (1.)	Number. (2)
Bakehouses all in excellent condition	10
Laundry	1
Bottling Store	1
Joiners' Shops and the like	4
Potted Meat Manufactory (small)	1
Dressmakers' premises in private houses	7
Boot repairers and similar small establishments ...	6
Total number of Workshops on the Register ...	39

5—OTHER MATTERS. *Nil.*

MARCH 1914,

WALTER HUNTER, M.D.,

Medical Officer of Health.